



FAITH FELLOWSHIP CHRISTIAN SCHOOL
 131 MOORE AVENUE, WATERTOWN, NEW YORK 13601
 PH: 315-782-9342 FAX: 315-786-0309 NYS REGISTRATION #15-514

RE-REGISTRATION 2024-2025

I would like to re-register the following student(s) *and I have paid the re-registration fees:*

Child's Name	Grade ('24-'25)

Registration fee prior to or on June 14th, 2024: \$225 per child
 Registration fee after June 14th, 2024: \$275 per child

PLEASE PROVIDE ANY UPDATED INFORMATION FOR THE FOLLOWING:

Parent's Names:	(Mom)	(Dad)
Mailing address:		
Home phone:		
Cell phone(s):	(Mom)	(Dad)
Email?	(Mom)	(Dad)
Home school district?		
Do you need bussing?		
Church affiliation?		
New health concerns?		
New emergency contact?		
Other changes that the office should be aware of (guardianship, death in family, etc.)?		



FAITH FELLOWSHIP CHRISTIAN SCHOOL

131 MOORE AVENUE, WATERTOWN, NEW YORK 13601
PH: 315-782-9342 FAX: 315-786-0309 NYS REGISTRATION #15-514

PARENT CONTRACT

1. I request the staff of FFCS to assist me in the education of _____
_____ (child's names) according to the FFCS philosophy of Education.
2. I have read, understand and agree with the school's discipline policy. I also understand that FFCS reserves the right to dismiss any student who proves disrespectful to the school's spiritual standards and authority or for manifesting a lack of cooperation with the educational process.
3. I understand that my participation in discipline is expected and required. I agree to fulfill my obligation to correct within the home any ongoing discipline problems that are manifested within the school. I understand that my failure to do so is grounds for the dismissal of my child from school.
4. I pledge to build strong relations with my child's teacher and aid in the training of my child through Godly example in the home.
5. I will see to it that my child comes to school and completes assignments as directed by their teacher(s).
6. I will see to it that my child arrives at school on time, staying for the duration of the school day, as pertaining to the published school calendar.
7. I pledge to cooperate in training the child to respect and care for school property.
8. I give permission for my child to take part in various school activities, including physical education classes and school plays.
9. I pledge to pay my financial obligations to FFCS in a timely manner. If difficulty in paying in a timely manner arises, I will contact the Business Manager.
10. I understand that my failure to fulfill any portion of this contract is considered to represent breaking of this contract and can be grounds for dismissal of my child from FFCS.
11. I understand and agree that continued enrollment and/or reenrollment of my child(ren) in FFCS is dependent on my parental support of the school, its staff, and its policies.

Father's Signature: _____ Date: _____

Mother's Signature: _____ Date: _____



FAITH FELLOWSHIP CHRISTIAN SCHOOL

131 MOORE AVENUE, WATERTOWN, NEW YORK 13601
PH: 315-782-9342 FAX: 315-786-0309 NYS REGISTRATION #15-514

2024-2025 TUITION AND REGISTRATION FEES FOR RETURNING STUDENTS

There is a non-refundable registration fee each year for every student.

Grade	Registration Fee	Tuition
K-12th Grades	\$275 (\$225 if paid by June 14)	\$4480

Discounts:

There are discounts for tuition when more than one child is enrolled in K-12th grades.

Siblings	Tuition
Second child	\$3870
Third child and all others	\$3250

Tuition Payment Information:

1. Payments can be made in full or on a monthly basis. Monthly payments (a total of 10) should be paid **August 1** through **May 1**.
2. Individual arrangements may be made according to the discretion of the administration.
3. **Cash or checks** can be accepted in the school office at any time. **Credit or debit card** payments are accepted in the school office at any time. **Online payments** can be made through your own personal banking institution or through our Business Manager.

Tuition Refund Policy:

Tuition paid for the month is refundable only if the office receives notification in writing, by the parents, thirty days prior to withdrawal. Pro-rated tuition applies only through May 1.

Outstanding Tuitions:

Report cards and/or school records will **not** be released when the tuition account is not current.



FAITH FELLOWSHIP CHRISTIAN SCHOOL

131 MOORE AVENUE, WATERTOWN, NEW YORK 13601
PH: 315-782-9342 FAX: 315-786-0309 NYS REGISTRATION #15-514

2024-2025 SCHOOL YEAR

LOAN OF TEXTBOOKS NEW YORK STATE TEXTBOOK ACT OF 1965

To: Board of Education _____
(Name of school district of residence)

Application is hereby made for the loan of textbooks listed below.

I understand that all books loaned to the pupil whose name appears on this form are to be maintained in proper condition and that if excessively damaged or lost, the book(s) will be repaired or replaced. I also understand that upon request, the books will be returned to the school district.

Student's
Name: _____ Grade: _____
Name: _____ Grade: _____
Name: _____ Grade: _____

Address: _____

School: Faith Fellowship Christian School
Address: 131 Moore Avenue, Watertown, NY 13601

Textbooks Requested-Title, Publisher

Mathematics	Saxon Publishers/Holt McDougal Larson
Reading	Abeka/ Bob Jones Publishers
Science	Prentice Hall/Pearson/Abeka
Social Studies	Abeka Publishers/Prentice Hall/Wadsworth, Inc.
Handwriting	Abeka/Bob Jones Publishers
Spanish	Abeka/Bob Jones Publishers/ Houghton Mifflin

Signed: _____ Date: _____

I certify that the books listed above will be used in the course study taken by this student.

Signed: _____ Date: 5/7/24
(Principal)